

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number, and Address): Telephone and Fax Nos.:	FOR COURT USE ONLY	
Attorney for (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE <input type="checkbox"/> Juvenile Division, 9991 County Farm Rd., Riverside, Ca. 92503 <input type="checkbox"/> Southwest Justice Center, 30955-D Auld Road, Murrieta, Ca. 92563 <input type="checkbox"/> Riverside Family Law, 4175 Main St., Riverside, Ca. 92501 <input type="checkbox"/> Indio Unified Family, 46-200 Oasis Street, Indio, Ca. 92201		
In the Matter of _____ <div style="text-align: right;">A Minor</div>		
<b>DRUG COURT –          ADDENDUM AGREEMENT TO PARTICIPATE IN PRIORITY HOUSING          ASSISTANCE</b>		Case No(s):

I AGREE TO THE FOLLOWING AS CONDITIONS OF RECEIVING A PRIORITY VOUCHER FOR HOUSING ASSISTANCE THROUGH THE HOUSING AUTHORITY:

1. Upon approval of the Court and Department of Social Services, the Housing Authority will add my name to the housing voucher currently in the name of \_\_\_\_\_. My signature on this Agreement indicates my consent to the terms and conditions set forth in this agreement.
2. The structure and process of all family-oriented drug courts includes judicial supervision, case management, frequent/random drug testing, parenting and/or Nurturing Families program, obtaining GED, obtaining or enhancing employment, and for Dependency cases only, meeting all the goals of the Department of Public Social Services reunification plan. Specifically, qualifications for a housing voucher will be strictly enforced and include:
  - 100% compliance with the Department of Public Social Services reunification plan (Dependency only)
  - Frequent/random drug testing (Cost of testing paid for by applicant)
  - Gainful employment that is verifiable and a minimum of 32 hours per week.
  - No criminal behavior within a three-year period
  - Appearance in drug court when required
  - Attitude, desire and motivation clearly demonstrate willingness to make a commitment to sobriety.
  - Keep rental units free from drug-related and violent or criminal activity
  - Awardees will be expected to fully participate in the Housing Authorities' Family Self-Sufficiency Program to help them move to economic independence so they will be free of any governmental assistance
  - Awardees must follow all rules and regulations set out by the Housing Authority
5. The drug court will monitor my progress in recovery through my case manager, who will submit reports to the Court. The progress reports will contain:
  - The results of every alcohol/drug test
  - Employment status
  - Progress on DPSS case plan

*(Continued on next page)*

	Case NO(s):
--	-------------

6. Each of the following will be considered a “non-compliant event” and may result in termination of housing assistance:
- A positive result from an alcohol/drug test (a “dirty test”)
  - Failure to appear for an alcohol/drug test (a “no-show”)
  - Failure to attend required court appearance, meetings and/or counseling sessions
  - Failure to attend treatment program activities
  - Failure to comply with the rules of the Drug Court and treatment program
  - Failure to comply with my Recovery Services Plan
  - A dishonest statement (written or spoken) to the Drug Court Judge
  - Failure to participate in the Family Self-Sufficiency Program
  - Failure to keep rental unit free from criminal, drug related and/or violent activity
  - Failure to comply with rules and regulations set forth by the Housing Authority

After consultation with my attorney, I have signed the “ ADDENDUM AGREEMENT TO PARTICIPATE IN PRIORITY HOUSING ASSISTANCE”.

Dated: _____	Dated: _____
_____ Name of Drug Court Participant (Print)	_____ Name of person to be added
_____ Signature of Drug Court Participant	_____ Signature of person to be added

---

Date: \_\_\_\_\_

\_\_\_\_\_  
Judge of the Superior Court